

**APPLICATION INFORMATION**

Application Type:: Continuation (Utility)  
Title:: TUNABLE OPTICAL DEVICE FOR DYNAMIC  
CHROMATIC DISPERSION AND POLARIZATION MODE  
DISPERSION COMPENSATION

Attorney Docket Number:: 9-15497-5US-1  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 17  
Small Entity?:: YES  
Petition included?:: NO  
Secrecy Order in Parent Appl.?:: NO

**INVENTOR INFORMATION**

Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given name:: TIGRAN  
Middle name::  
Family name:: GALSTIAN  
Name Suffix::  
City of Residence:: QUEBEC CITY  
State or Province of Residence:: QUEBEC  
Country of Residence:: CANADA  
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City:: QUEBEC CITY  
State or Province:: QUEBEC  
Country:: CANADA  
Postal or Zip Code:: G1V 2W1

Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given name:: ARMEN  
Middle name::  
Family name:: ZOHRABYAN  
Name Suffix::  
City of Residence:: QUEBEC CITY  
State or Province of Residence:: QUEBEC

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Street:: 2455 CH. STE-FOY #302  
STE-FOY  
City:: QUEBEC CITY  
State or Province:: QUEBEC  
Country:: CANADA  
Postal or Zip Code:: 1V 1T4

Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given name:: DANY  
Middle name::  
Family name:: DUMONT  
Name Suffix::  
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State or Province of Residence:: QUEBEC  
Country of Residence:: CANADA  
Street:: 305-227 CH. STE-FOY

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State or Province:: QUEBEC  
Country:: CANADA  
Postal or Zip Code:: G1V 1S7

Inventor Authority Type:: INVENTOR  
Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given name:: AMIR  
Middle name::  
Family name:: TORK  
Name Suffix::  
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State or Province of Residence:: QUEBEC  
Country of Residence:: CANADA  
Street:: 4332 DE LA SITTELLE

City:: CAP ROUGE  
State or Province:: QUEBEC  
Country:: CANADA  
Postal or Zip Code:: G1Y 2H5

Inventor Authority Type:: INVENTOR

Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given name:: ROUSLAN  
Middle name::  
Family name:: BIRABASSOV  
Name Suffix::  
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State or Province of Residence:: QUEBEC  
Country of Residence:: CANADA  
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City:: QUEBEC CITY  
State or Province:: QUEBEC  
Country:: CANADA  
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**CORRESPONDENCE INFORMATION**

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**REPRESENTATIVE INFORMATION**

Representative Customer Number:: 020988

**DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Claims priority from	60/409,197	09/10/2002
This Application	Continuation of	10/658,462	09/10/2003
			MM/DD/YY
			MM/DD/YY

**ASSIGNEE INFORMATION**

Assignee name:: *Photintech Inc.*  
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